


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 12, 2006 8:00 am**  
**Secretary of State**

01-12-2006 90164 020 \*\*\*158.75

**DOCUMENT # P94000051238**


1. Entity Name  
 THE PHONE COMPANY, INC.



Principal Place of Business 997 W KENNEDY BLVD SUITE A25 ORLANDO, FL 32810	Mailing Address 997 W KENNEDY BLVD SUITE A25 ORLANDO, FL 32810
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**DO NOT WRITE IN THIS SPACE**

40000781



01042006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3254505	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LAVELLE, PATRICIA  
 997 W KENNEDY BLVD  
 SUITE A25  
 ORLANDO, FL 32810

**DO NOT WRITE IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPS LAVELLE, PATRICIA 997 W KENNEDY BLVD A25 ORLANDO, FL 32810
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Bernard Kaplan, President 997 W. Kennedy Blvd, St A25 Orlando, Florida 32810
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**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with any address with all other like empowered.

**SIGNATURE:** *Patricia Lavelle V.P.* **1/4/06** **407 660-9542**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #